	PART B - FEE(S) TRANSMITTAL							j.		
	Complete and send this form, together with applicable fe				ee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-145					
1	DEC 2 2 2004						•			
134	INSTRUCTIONS: This for appropriate. All further con indicated unless cornected	rm should be used for tran rrespondence including the below or directed otherwise	smitting the ISSUI Patent, advance ord in Block 1, by (a)	E FEE and lers and noti specifying	PUBLIC ification a new co	ATION FEE (if requot maintenance fees verespondence address	ired). Blocks I through 5 s will be mailed to the current ; and/or (b) indicating a sep	hould be completed where correspondence address as arate "FEE ADDRESS" for		
	or Fax (703) 746-4000 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the confidence used to receive the properties of the confidence of the properties of the confidence and the conf					mailing can only be used f	or domestic mailings of the			
		590 12/16/2004				papers. Each addition have its own certificat	al paper, such as an assignm e of mailing or transmission.	ent or formal drawing, must		
	LEWIS, RICE & ATTN: BOX IP D 500 NORTH BRO SUITE 2000					I hereby certify that to States Postal Service addressed to the Ma	rtificate of Mailing or Tran his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO (703) 746-4000, on the	ig deposited with the United rst class mail in an envelope above, or being facsimile		
12/30	/2004 EAREGAYZ 00000	3102						(Depositor's name)		
01 FC	:1501	1400.00 OF						(Signature)		
02 FC	APPLICATION NO.	300.00 DP FILING DATE	ı	FIRST NAMED INVE		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
	10/085,397	02/28/2002		Mark B. I	Nordstror	n	26/1164US	6730		
	THE OF INVENTION: P	PIVOTING SHOULDER STI	AT TOK A BACK							
	APPLN. TYPE	SMALL ENTITY	ISSUE FE		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
/	nonprovisional	YES	\$700	4 1400		\$300	\$ 1000- 17 <i>00</i>	03/16/2005		
. *	EXAN	MINER	ART UN	ART UNIT CLASS-SUBC						
	CRONIN,	3727 224-631000								
	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address for PTO/SB/122) attached. Cha									
		D RESIDENCE DATA TO E	E PRINTED ON T							
	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
-	(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) St. Lowis, MO 63132									
	Please check the appropriat	te assignee category or catego	ories (will not be pri	inted on the	patent) :	Individual 🖸	Corporation or other private g	roup entity Governmen		
	Please check the appropriate assignee category or categories (will not be printed on the patent):									
Publication Fee (No small entity discount permitted) Advance Order - # of Copies Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any cards are cards.						r credit any overpayment, to				
	5. Change in Entity Statu	s (from status indicated abov	e)	Deposit Ac	count Nu	mber	(enclose an extra	copy of this form).		
		SMALL ENTITY status. See D is requested to apply the Iss Publication Fee (if required) cords of the Whited States Par								
	Authorized Signature	1/1				Date	12/22/04			
	Typed or printed name	KIK A.	Damma		_	Registratio		01		
	This collection of information an application. Confidential submitting the completed a	ion is required by 37 CFR 1 lity is governed by 35 U.S.C application form to the USP	311. The information 122 and 37 CFR O. Time will vary	on is required 1.14. This co depending t	d to obtain ollection upon the	or retain a benefit by is estimated to take 12 individual case. Any	the public which is to file (a minutes to complete, include comments on the amount of	nd by the USPTO to process ling gathering, preparing, and time you require to complete		

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

OIPE									
CERTIFICATE O	Docket No.								
Applicant(s): Mark B	Nordstrom DEC 2	2 2004	26/1	164US					
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit					
10/085,397	02/28/2002	Stephen K. Cronin	22822	3727					
Invention: Pivoting Shoulder Strap for a Backpack									
	<u></u>								
I hereby certify that	the following corresponde	nce:							
		- 4171 maleocano) or 400 c c c c c c c c c c c c c c c c c c	D / D						
Copy of Part B - Fee	(s) Transmittal (1pg.), Che	ck# Z S (\$1700), Certificate of Ma	lling, Return Rece	eipt Postcard					
	(Identify type of correspondence)								
is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37									
CFR 1.10 in an enve	elope addressed to: Com	missioner for Patents, P.O. Box 1450	, Alexandria, VA	22313-1450 on					
	12/22/2004								
	(Date)								
	Samantha M. Stroup								
		(Typed or Printed Name of Pers	on Mailing Correspond	lence)					
	La Markelle								
(Signature of Person Mailing Correspondence)									
ER467895046US									
	("Express Mail" Mailing Label Number)								

Note: Each paper must have its own certificate of mailing.

Approved for use through 07/31/2006. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	\$1,700.	00

Complete if Known					
Application Number	10/085,397				
Filing Date	02/29/2002				
First Named Inventor	Mark B. Nordstrom				
Examiner Name	Stephen K. Cronin				
Art Unit	3727				
Attorney Docket No.	26/1164US				

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)							
Check Credit card Money Other None			DNAL			-		
Deposit Account:	Large I Fee	<u>Entity</u> Fee	Smal Fee	<u>l Entity</u> Fee		Dan awindi		E. B.14
Deposit	Code	(\$)	Code	(\$)		Description		Fee Paid
Account Number 50-097	1051	130	2051		Surcharge - late	-		
Deposit	1052	50	2052	25	Surcharge - late sheet	e provisional	i filing fee or	cover
Account Name	1053	130	1053	130	Non - English s	pecification		
The Director is authorized to: (check all that apply)	1812	2,520	1812	2,520	For filing a requ	est for ex pa	arte reexamir	nation
Charge fee(s) indicated below Credit any overpayments	1804	920*	1804	920°	Requesting pub	lication of S	IR prior to E	xaminer
Charge any additional fee(s) or any underpayment of fee(s)	1805	1,840*	1805	1.840*	action Requesting pub	lication of S	IR after Exa	miner
Charge fee(s) indicated below, except for the filling fee				·	action			
to the above-identified deposit account.	1251	110	2251		Extension for re	• •		
FEE CALCULATION	1252	430	2252		Extension for reply within second month			
1. BASIC FILING FEE	1253	980	2253					
Large Entity Small Entity		1,530	2254		Extension for re	. •		
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	1255	2,080	2255	•	Extension for re		th month	
1001 790 2001 395 Utility filing fee	1401	340	2401	170	Notice of Appea	al		
1002 350 2002 175 Design filing fee	1402	340	2402	170	Filing a brief in	support of a	n appeal	
1003 550 2003 275 Plant filing fee	1403	300	2403	150	Request for oral	l hearing		
1004 790 2004 395 Reissue filing fee	1451	1,510	1451	1,510	Petition to institu	ute a public	use proceed	ing
1005 160 2005 80 Provisional filing fee	1452	110	2452	55	Petition to revive	e - unavoida	able	
SUBTOTAL (1) (\$)	1453	1,370	2453	685	Petition to revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND	1501	1,370	2501	685	Utility issue fee (or reissue) 1,700			1,700.00
Fee from	1502	490	2502	245	Design issue fee	е		
Extra Claims below Fee Paid	1503	660	2503	330	Plant issue fee			
Total Claims	1460	130	1460	130	Petitions to the	Commission	ner	
Independent - 3** = 0 X = 0.00 Claims Multiple Dependent =	1807	50	1807	50	Processing fee	under 37 CF	R § 1.17(q)
Large Entity Small Entity	1806	180	1806	180	Submission of Information Disclosure			
Fee Fee Fee Fee Description Code (\$) Code (\$)	8021	40	8021	40	Statement Recording each			property
1202 18 2202 9 Claims in excess of 20	1809	790	2809	395	(times number of properties) 5 Filing a submission after final rejection (37 CFR § 1.129(a))			
1201 88 2201 44 Independent claims in excess of 3	1810	790	2810	395	For each addition	onal inventio	n to be exam	nined
1203 300 2203 150 Multiple dependent claim, if not paid					(37 CFR § 1.1)		mination (DC	,r,
1204 88 2204 44 ** Reissue independent claims over original patent	1801	790	2801		Request for Cor		•	,°)
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for exp of a design appl		nination	
and over original patent	Oth	er fee (:	specify					
SUBTOTAL (2) (\$) \$0.00								
**or number previously paid, if greater; For Reissues, see above	*Red	luced b	y Basic	Filing	Fee Paid	SUBTO	IAL (3)	(\$) \$1,700.00
SUBMITTED BY						Complete (if applicable)	
Name (Print/Type)		Registra Attorney	ation No //Agent)).	42,461	Telephone	3	314-444-1783
Signature						Date	1:	2/22/2004

WARNING://nformation on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

This collection of increase of the completed application. Provide credit card information and authorization of the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.